PATENT ATTORNEY DOCKET NO. 43876-084

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Craig Hansen et al.

08/754,827 lal No.:

Filed: November 22, 1996

Group Art Unit: 2302

Examiner: A. SHAH

For: GENERAL PURPOSE, PROGRAMMABLE MEDIA PROCESSOR

# AMENDMENT TRANSMITTAL

Honorable Commissioner of Patents and Trademarks, Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment for the above-identified \_X\_ application.

#### **STATUS**

Applicant is \_\_\_ is small entity - verified statement: \_\_\_ attached \_\_\_ already filed. \_X\_ \_ X other than a small entity.

### EXTENSION OF TIME

- 3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.
  - Applicant petitions for an extension of time for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
one month X two months three months	\$ 55.00 200.00 475.00	\$ 110.00 400.00 950.00
four months	755.00	1,510.00

Fee \$400.00

If an additional extension of time is required, please consider this a petition therefor.

 An ex	tension	for	:	mor	nths	has	al	read	ly be	een	sec	ured	l and	l the	: fee
paid	therefor	of	·	is	dedı	acte	d f	rom	the	tot	al	fee	due	for	the
total	months	of	exter	ısio	on no	ow re	equ	este	ed.						

Extension fee due with this Request \$\_

(b) Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

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4. X The fee for claims has been calculated as shown below:

Claims Highest Remaining Number After Previously Present : Amendment : Paid For : Extra : Rate		:	Additional Fee
Total : : : :			
<u>Claims</u> : 11 : 20 : x \$ 22.00	=	:	0
Independent : : : :		: _	
Claims : 1 : 3 : 0 : x \$ 82.00	=	_:	0
Multiple Dependent Claims (first presentation) : \$270.00	=	:	0
Total	=	:	0
Reduction by ½ for		:	
small entity		:	<u>- 0</u>
TOTAL FEE		:	0

(a) X No additional fee for claims is required.

-OR-

(b) \_\_\_ The total additional fee for claims required \$\_

## FEE PAYMENT

- 5. \_\_\_ Attached is a check in the amount of \$\_.
  - $\underline{X}$  Charge Deposit Account No. 13-0203 the amount of \$400.00. A duplicate copy of this Transmittal is enclosed for accounting purposes.

#### FEE DEFICIENCY

\_X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 13-0203.

## AND/OR

X If any additional fee for claims is required, charge Deposit Account No. 13-0203. A duplicate copy of this Transmittal is enclosed for accounting purposes.

Respectfully submitted,

MCDERMOTT, WILL & EMERY

Date: february 11,1998

By:

Craig L. Plastrik

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